## FORMAL COMPLAINT

## OFFICIAL FILE ILLINOIS COMMERCE COMMISSION

Milnois Commerce Commission \$27 East Capital Avenue

Springfield, Hilnois \$2794-9280



JUL 1 0 2001

ILLINOIS COMMERCE COMMISSION

CONSUMER AFFAIRS DIVISION

SPRINGFIELD OFFICE

For Commission Use Only:

Regarding a complaint
by BURTON KINSTERN Preson making the complainty
against AMERIECH - ILL BOIL TOTAL NE NUMBER OF TIME:
** TENDULANT BILLING OF TIME. OI-0494 &
in CHICAGO Harcomplaint illinois.
TO THE ILLINOIS COMMERCE COMMISSION. SPRINGFIELD, ILLINOIS:
My mailing address is 2930 NSHOPIDAN RD CHGO TL 60667
The service address that I am complaining about is 2930 N SHERIDAN RO. CHICAGO IL 60655
My home telephone number is [773 ] 976- 4943  Between 8:30 a.m. and 5:00 p.m. weekdays I can be reached at [773 ] 697- 6867
Americans of the provisions of
the Illinois Public Utilities Act.
In the space below, list the specific section of the law, Commission rule(s), or utility tariffs which you think are involved with you complaint.
83.11 ADM 200.170 FRAND
Have you contacted the Consumer Affairs Division of the Illinois Commerce Commission about
Has your compleint filed with that office been closed?

Please state your complaint briefly. Number each of the paragraphs. Please include any specific time period and dollar amounts involved with your complaint. Use an extra sheet of paper, if needed.
1) FORTHE MONTHS OF FEB, MANCHY APRIL 7001 I WIS
BILLED FORTIME NOT USED
Please clearly state what you want the Commission to do in this case.
TO CANCELL CHARGES BILLED IN A ERROR
Date: 7 6 2001  (Month, day, and year)
Complainant's signature Junty Censtern
If you will be represented by an attorney, please give the attorney's name, address, and telephone number.
You need to file the original and three copies of this form with the Commission and also provide the Commission one copy for each utility complained about (referred to as respondents).
VERIFICATION
A notary public must watch you fill out this part of the form.
I, BUATON EINSTEIN., first being duly sworn, say that I have read the above petition and know what it says. The Equition of this petition are true to the best of my knowledge.
(Sul Zente
(Signature)
Subscribed and sworn/affirmed to before me this 6 day of $\sqrt{UL}$ , 10-200 (.
Notary Public, Illinois  OFFICIAL SEAL  DONALD E. CORTELYOU  NOTARY PUBLIC, STATE OF ILLINOIS  MY COMMISSION EXPIRES 1-24-2005
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Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint.

cc207/07

NOTE: